

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK**

In re: SEAN M. MURRAY

Case No. 1-17-44157-ess
Chapter: 7

Debtor(s)

AFFIDAVIT PURSUANT TO E.D.N.Y. LBR 1009-1(a)

SEAN M. MURRAY, undersigned debtor herein, swears as follows:

1. Debtor filed a petition under chapter _____ of the Bankruptcy Code on 8/10/2017
2. Filed herewith is an amendment to Schedule I, E/F and Mail Matrix [indicate ~~list(s)~~, ~~schedule(s)~~ or ~~statement(s)~~ being amended] previously filed herein.
3. Annexed hereto is a listing setting forth the specific additions or corrections to, or deletions from, the affected list(s), schedule(s) or statement(s). The nature of the change (addition, deletion or correction) is indicated for each creditor or item listed.
4. [If creditor records have been added or deleted, or mailing addresses corrected] An amended mailing matrix is annexed hereto, reflecting only changes adding or deleting as have been referred to above.

Dated: 11/2/2017

SEAN M. MURRAY
(Signature of Debtor)

Sworn to before me this 02
day of November, 2017

ANA PATRICIA SANTACRUZ
Notary Public, State of New York

ANA PATRICIA SANTACRUZ
Notary Public, State of New York
No. 01SA6191021
Qualified in Queens County
Commission Expires Aug. 4, 2020

Reminder: No amendment of schedules is effective until proof of service in accordance with E.D.N.Y. LBR 1009-1(b) has been filed with the Court.

If this amendment is filed prior to the expiration of the time period set forth in Fed. R. Bankr. P. 4004 and 4007, it will be deemed to constitute a motion for a 30-day extension of the time within which any added creditors may file a complaint to object to the discharge of the debtor and/or to determine dischargeability. This motion will be deemed granted without a hearing if no objection is filed with the Court and served on debtor within 14 days following filing of proof of service of this affidavit, all attachments and the amended schedules in accordance with EDNY LBR 1009-1.

UNITED STATES BANKRUPTCY COURT

Eastern District of New York

In Re: SEAN M. MURRAY

Case No.: 1-17-44157-ess

Chapter: 7 Judge: Elizabeth S. Stong

LISTING OF CHANGES TO PETITION SCHEDULES I, E/F, MAILING MATRIX

Schedule I has been amended to change the amount of other income (items 8h, 9, 10, 12)

Schedule E/F has been amended to change the address and amount of item 4.9 to,

HSBC BANK USA N.A.
1 Mortgage Way
Mount Laurel, NJ 08054

3/2008

\$238176.40

the amount owed of items 4.14 and 4.15,

and added page 8 to schedule E/F featuring items 4.16 and 4.17 to add creditors,

MR. COOPER
8950 Cypress Waters Blvd.
Dallas, TX 75019

7/2017

\$238176.40

and

HSBC MORTGAGE CORPORATION (USA)
2929 Walden Avenue
Depew, NY 14043-2602

3/2008

\$238176.40

A supplemental mailing matrix is also annexed to this affidavit.

I declare under penalty of perjury that I have read the foregoing statements and that they are true and accurate to the best of my knowledge, information and belief.

Dated this 2nd day of November, 2017.

SEAN M MURRAY

(Signature of Debtor)

HSBC Bank USA NA
1 Mortgage Way
Mount Laurel, NJ 08054

HSBC MORTGAGE CORPORATION (USA)
2929 Walden Ave
Depew, NY 14043

MR. COOPER
8950 Cypress Waters Blvd.
Dallas, TX 75019

Fill in this information to identify your case:

Debtor 1 **SEAN M. MURRAY**
 First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number **1-17-44157-ess**
 (If known)

☒ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims against you?**
☐ No. Go to Part 2.

☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1 Internal Revenue Service Priority Creditor's Name Number Street Ogden UT 84201-00 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Last 4 digits of account number 8657 When was the debt incurred? 4/24/2017 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____	\$ 22,422	\$ 22,422

2.2 Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____		
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Debtor 1

SEAN M. MURRAY

First Name Middle Name Last Name

Case number (if known) 1-17-44157-ess

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim

Priority
amountNonpriority
amount

2.3

Priority Creditor's Name

Last 4 digits of account number

\$ \$ \$

Number Street

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

City State ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

☐ Domestic support obligations☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were intoxicated☐ Other. Specify

Is the claim subject to offset?

☐ No☐ Yes

2.4

Priority Creditor's Name

Last 4 digits of account number

\$ \$ \$

Number Street

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

City State ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

☐ Domestic support obligations☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were intoxicated☐ Other. Specify

Is the claim subject to offset?

☐ No☐ Yes

2.5

Priority Creditor's Name

Last 4 digits of account number

\$ \$ \$

Number Street

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

City State ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

☐ Domestic support obligations☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were intoxicated☐ Other. Specify

Is the claim subject to offset?

☐ No☐ Yes

Debtor 1

SEAN M. MURRAY

First Name Middle Name Last Name

Case number (if known) 1-17-44157-ess

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1 American Express

Nonpriority Creditor's Name

Post Office Box 981537

Number Street TX 79998
 El Paso
 City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt**Is the claim subject to offset?**

- ☐ No
- ☒ Yes

Last 4 digits of account number 8223

When was the debt incurred? 12/24/2011

Total claim

\$ 11,067

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify Credit Card

4.2 Bank of America

Nonpriority Creditor's Name

Post Office Box 982238

Number Street TX 79998
 El Paso
 City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt**Is the claim subject to offset?**

- ☐ No
- ☒ Yes

Last 4 digits of account number 3342

When was the debt incurred? 11/01/2011

\$ 20,085

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify Flexible Spending Credit Card

4.3 Chase Card

Nonpriority Creditor's Name

Post Office Box 15298

Number Street DE 19850
 Wilmington
 City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt**Is the claim subject to offset?**

- ☐ No
- ☒ Yes

Last 4 digits of account number 0220

When was the debt incurred? 10/27/2012

\$ 12,529.23

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify Credit Card Account

SEAN M. MURRAY

Debtor 1

First Name

Middle Name

Last Name

Case number (if known)

1-17-44157-ess

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4

Chase Card

Nonpriority Creditor's Name

Post Office Box 15298

Number Street
Wilmington

DE

19850

City

State

ZIP Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☐ No☒ Yes

Last 4 digits of account number 3203

\$ 1,471

When was the debt incurred? 11/04/2011

As of the date you file, the claim is: Check all that apply.☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card Account

4.5

Chase Card

Nonpriority Creditor's Name

Post Office Box 15298

Number Street
Wilmington

DE

19850

City

State

ZIP Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☐ No☒ Yes

Last 4 digits of account number 8426

\$ 6,292

When was the debt incurred? 11/04/2011

As of the date you file, the claim is: Check all that apply.☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Flexible Spending Credit Card

4.6

Chase Card

Nonpriority Creditor's Name

Post Office Box 15298

Number Street
Wilmington

DE

19850

City

State

ZIP Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☐ No☒ Yes

Last 4 digits of account number 6243

\$ 1,415

When was the debt incurred? 4/25/2013

As of the date you file, the claim is: Check all that apply.☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card Account

Debtor 1

SEAN M. MURRAY

First Name

Middle Name

Last Name

Case number (if known) 1-17-44157-ess

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.7

DISCOVER FINCL SVC LLC

Nonpriority Creditor's Name

Post Office Box 15316

Number Street
Wilmington

DE

19850

City

State

ZIP Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☐ No☒ Yes

Last 4 digits of account number 9533

\$ 6,220.14

When was the debt incurred? 5/28/2013

As of the date you file, the claim is: Check all that apply.☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card Account

4.8

HSBC BANK

Nonpriority Creditor's Name

Post Office Box 9

Number Street
Buffalo

NY

14240

City

State

ZIP Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☐ No☒ Yes

Last 4 digits of account number 2950

\$ 11,885

When was the debt incurred? 10/17/2011

As of the date you file, the claim is: Check all that apply.☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card

4.9

HSBC BANK USA N A

Nonpriority Creditor's Name

1 Mortgage Way

Number Street
Mt. Laurel

NJ

08054

City

State

ZIP Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☐ No☒ Yes

Last 4 digits of account number 1268

\$ 38,176.40

When was the debt incurred? 3/3/2008

As of the date you file, the claim is: Check all that apply.☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Conv Real Estate Mtg

Debtor 1

SEAN M. MURRAY

First Name

Middle Name

Last Name

Case number (if known) 1-17-44157-ess

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

.10

MORTGAGE SERVICE CENTER

Nonpriority Creditor's Name

2001 Bishop Gate Boulevard

Number

Street

Mount Laurel

NJ

08054

City

State

ZIP Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☐ No☒ Yes

Last 4 digits of account number 5176

\$ 0

When was the debt incurred? 008/04/2014

As of the date you file, the claim is: Check all that apply.☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify CONV REAL ESTATE MTG

.11

TOYOTA MOTOR CREDIT CORP

Nonpriority Creditor's Name

5005 N RIVER BLVD NE

Number

Street

Cedar Rapids

IA

52411

City

State

ZIP Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☐ No☒ Yes

Last 4 digits of account number 4949

\$ 10,481

When was the debt incurred? 12/01/2012

As of the date you file, the claim is: Check all that apply.☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify AUTOMOBILE

.12

PHH MORTGAGE SERVICE

Nonpriority Creditor's Name

2001 BISHOPS GATE BLVD

Number

Street

Mount Laurel

NJ

08054

City

State

ZIP Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☐ No☒ Yes

Last 4 digits of account number 5176

\$ 0

When was the debt incurred? 9/25/2013

As of the date you file, the claim is: Check all that apply.☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify CONV REAL ESTATE MTG

Debtor 1

SEAN M. MURRAY

First Name

Middle Name

Last Name

Case number (if known) 1-17-44157-ess

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

.13

NATIONSTAR MORTGAGE

Nonpriority Creditor's Name

Post Office Box 15316

Number Street
Wilmington

DE

19850

City

State

ZIP Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☐ No☒ Yes

Last 4 digits of account number 9916

\$ 238176.40

When was the debt incurred?

3/2017

As of the date you file, the claim is: Check all that apply.☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify CONV REAL ESTATE MTG

.14

CAPTIAL ONE

Nonpriority Creditor's Name

Post Office Box 30285

Number Street
SALT LAKE CITY

UT

84130

City

State

ZIP Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☐ No☐ Yes

Last 4 digits of account number 1287

\$ 750

When was the debt incurred?

3/2015

As of the date you file, the claim is: Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify CREDIT CARD

.15

WALAILUK TECHAMA MURRAY

Nonpriority Creditor's Name

40-52 75th St Apt 5F

Number Street
ELMHURST

NY

11373

City

State

ZIP Code

Who incurred the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☐ No☒ Yes

Last 4 digits of account number

\$ n/a

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.☒ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Divorce

Debtor 1

SEAN M. MURRAY

First Name

Middle Name

Last Name

Case number (if known) 1-17-44157-ess

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

.16

Mr. Cooper

Nonpriority Creditor's Name

8950 Cypress Waters Blvd.

Number

Street

TX

75019

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☒ Yes

Last 4 digits of account number 9916

\$ 238176.40

When was the debt incurred? 3/2017

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify CONV REAL ESTATE MTG

.17

HSBC MORTGAGE CORPORATION (USA)

Nonpriority Creditor's Name

2929 WALDEN AVENUE

Number

Street

NY

14043-2602

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☒ Yes

Last 4 digits of account number 2689

\$ 238176.40

When was the debt incurred? 3/3/2008

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify CONV REAL ESTATE MTG

Last 4 digits of account number

\$

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify

Nonpriority Creditor's Name

Number

Street

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Debtor 1

SEAN M. MURRAY

First Name

Middle Name

Last Name

Case number (if known) 1-17-44157-ess

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number _____

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number _____

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number _____

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number _____

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number _____

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number _____

Debtor 1

SEAN M. MURRAY

First Name

Middle Name

Last Name

Case number (if known) 1-17-44157-ess

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claim**Total claims from Part 1**

6a. Domestic support obligations

6a. \$ 0

6b. Taxes and certain other debts you owe the government

6b. \$ 22,422

6c. Claims for death or personal injury while you were intoxicated

6c. \$ 0

6d. Other. Add all other priority unsecured claims. Write that amount here.

6d. + \$ 0

6e. Total. Add lines 6a through 6d.

6e. \$ 22,422

Total claim**Total claims from Part 2**

6f. Student loans

6f. \$ 0

6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims

6g. \$ 0

6h. Debts to pension or profit-sharing plans, and other similar debts

6h. \$ 0

6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6i. + \$ 1034900.97

6j. Total. Add lines 6f through 6i.

6j. \$ 1034900.97

Fill in this information to identify your case:

Debtor 1 **SEAN M. MURRAY**
 First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number **1-17-44157-ess**
 (If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

- ☐ Employed
☒ Not employed

- ☐ Employed
☐ Not employed

Occupation**Employer's name****Employer's address**

Number Street

Number Street

City State ZIP Code

City State ZIP Code

How long employed there? _____

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1**For Debtor 2 or non-filing spouse**

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 0

\$

3. Estimate and list monthly overtime pay.

3. + \$ 0

+ \$

4. Calculate gross income. Add line 2 + line 3.

4. \$ 0

\$

Debtor 1

SEAN M. MURRAY

First Name

Middle Name

Last Name

Case number (if known) 1-17-44157-ess

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here..... → 4.	\$ 0	\$
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$	\$
5b. Mandatory contributions for retirement plans	5b. \$	\$
5c. Voluntary contributions for retirement plans	5c. \$	\$
5d. Required repayments of retirement fund loans	5d. \$	\$
5e. Insurance	5e. \$	\$
5f. Domestic support obligations	5f. \$	\$
5g. Union dues	5g. \$	\$
5h. Other deductions. Specify: _____	5h. + \$	+ \$
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ 0	\$
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0	\$
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0	\$
8b. Interest and dividends	8b. \$ 0	\$
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0	\$
8d. Unemployment compensation	8d. \$ 0	\$
8e. Social Security	8e. \$ 0	\$
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0	\$
8g. Pension or retirement income	8g. \$ 0	\$
8h. Other monthly income. Specify: Reimbursement	8h. + \$ 1250	+ \$
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 1250	\$
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 1250	\$ + \$ 1250 = \$ 1250
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____		
		11. + \$ 0
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies		12. \$ 1250 Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____		

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK

In Re: SEAN M. MURRAY

CLERK
U.S. BANKRUPTCY COURT
EASTERN DISTRICT OF
NEW YORK
2017 NOV -6 P 12:51
RECEIVED/MR

Case No.: 1-17-44157-ess

Chapter: 7

CERTIFICATION OF SERVICE

1. I, SEAN M. MURRAY:

☒ am the Petitioner in this case and am representing myself.

2. On November 2, 2017, I sent a copy of the following pleadings and/or documents to the parties listed in the chart below.

Amended Schedule I, E/F; Supplemental Mailing Matrix; Notice of Chapter 7 Bankruptcy Case; Notice of Electronic Filing Procedure; Certificate of Debtor Education; Form USBC-63, Affidavit Pursuant to EDNY LBR 1009-1(a); Listing of changes to petition schedules I, E/F.

3. I certify under penalty of perjury that the above documents were sent using the mode of service indicated.

Date: Thursday, November 2, 2017

Signature:

SEAN M. MURRAY

Name and Address of Party Served	Relationship of Party to the Case	Mode of Service
Richard McCord Certilman Balin & Hyman 90 Merrick Avenue East Meadow, NY 11554	Attorney for Trustee and Trustee	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input checked="" type="checkbox"/> Email PDF

Office of the United States Trustee Eastern District of NY (Brooklyn) US Federal Office Building 201 Varick Street, Suite 1006 New York, NY 10014	United States Trustee	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other
HSBC Bank USA NA 1 Mortgage Way Mount Laurel, NJ 08054	Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other
HSBC MORTGAGE CORPORATION (USA) 2929 Walden Ave Depew, NY 14043	Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other
MR. COOPER 8950 Cypress Waters Blvd. Dallas, TX 75019	Creditor	<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input checked="" type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other
CAPITAL ONE Post Office Box 30285 SALT LAKE CITY, UT 84130	Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other
Robert A. Gavin, Jr. Clerk of the Bankruptcy Court 271-C Cadman Plaza East, Suite 1595 Brooklyn, NY 11291-1800	Clerk of the Bankruptcy Court	<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input checked="" type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other



Internal Revenue Service

United States Department of the Treasury

This Product Contains Sensitive Taxpayer Data

Request Date: 04-08-2017
Response Date: 04-08-2017
Tracking Number: 100325086561

Wage and Income Transcript

SSN Provided: [REDACTED]
Tax Period Requested: December, 2015

Form 1098 Mortgage Interest Statement

Recipient/Lender:
Recipient's Federal Identification Number (PIN): 112739323
35-21 79TH STREET TENANTS
JOHN B LOVETT ASSOCIATES LTD
109 15 14TH AVENUE
COLLEGE POINT, NY 11356-0000

Payer/Borrower:
Payer's Social Security Number [REDACTED]
MURRAY, SEAN MICHAEL
ATTN COMPLEX TEAM SV01
1 MORTGAGE WAY
MOUNT LAUREL, NJ 08054-0000

Submission Type:	Original document
Account Number (Optional):	4640906
Mortgage Interest Received from Payer(s)/Borrower(s):	\$1,037.00
Points Paid on Purchase of Principal Residence:	0.00
Refund of Overpaid Interest:	0.00

This Product Contains Sensitive Taxpayer Data



Internal Revenue Service

United States Department of the Treasury

This Product Contains Sensitive Taxpayer Data

Request Date: 04-08-2017
Response Date: 04-08-2017
Tracking Number: 100325066600

Wage and Income Transcript

SSN Provided: [REDACTED]
Tax Period Requested: December, 2016

Form 1099-R Distributions from Pensions, Annuities, Retire or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

Payer:
Payer's Federal Identification Number (FIN): 043157927
BOSTON FINANCIAL DATA SERVICES
C/O LINCOLN FINANCIAL GROUP
PO BOX 7876
FORT WAYNE, IN 46801-7876

Recipient:
Recipient's Identification Number: [REDACTED]
SEAN M MURRAY
PO BOX 1110
ALBANY, NY 12201-1110

Submission Type:Original document
Account Number (Optional):000001905094688657AA
Distribution Code Value:Direct rollover and rollover contribution
Distribution Code:G
Distribution Code Value:Not significant
Distribution Code:Blank
Tax Amount Undetermined Code:Not checked
Total Distribution Code:Total Distribution
First Year Roth Contribution:0000
SEP Indicator:IRA/SEP/SIMP box not checked
FATCA Indicator:not FATCA
Tax Withheld:0.00
Total Employee Contributions:0.00
Unrealized Appreciation:0.00
Other Income:0.00
Gross Distribution:\$47,173.00
Taxable Amount:0.00
Eligible Capital Gains:0.00
Amount to IRR:0.00

This Product Contains Sensitive Taxpayer Data